## See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services Toxic Substances Control Division Secramento, California

	print or type. (Form designed for use on elite (12-pitch typewriter).	ni or Pa	86.1			Secremento, California		
		anifest ment No.		of la not :	Information in the shaded areas is not coquired by Federal law.			
	3. Generator's Name and Mailing Address PARA PLATE			A: State Manifest Document Number 88615562				
	15910 SHOEMAKER AVE, CERRITOS, CA 90703			B. State Generatur's 전				
	Generator's Phone <b>21</b> 3 ) 404-3434							
	Transporter 1 Company Name  6. US EPA ID Number  DMEGA RECOVERY SERVICES CAD   042   245   001   1   1			C. Siste Transporter's ID				
	Transporter 2 Company Name 8. US EPA ID Number			E. State Trac sporter's ID				
					F. Transporter's Phone			
	9. Designated Facility Name and Site Address 10. US EPA ID Number			G. State Facility's ID  CIANS HI 22445 0011				
	OMEGA RECOVERY SERVICES 12504 E. WHITTIER BLVD			(4) 14   24 45   Q0   1   H. Facility's Phons				
	WHITTIER, CA 90602   CAD 042 245 00	111		213	698	-0991		
	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Cont	ainers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.		
	* WASTE ORM-A N.O.S NA 1693	10.	190		V417 VOI	State		
	(FLEXOSOLVENT)				0	211,212 EPA/Other		
		0012	DM	900160	G	F001,F003		
	b.					State		
			1	1 1 1 1		EPA/Other		
	C.					State		
						EPA/Other		
			1			State		
	d.					2000		
		11	1			EPA/Other		
	J. Additional Descriptions for Materials Listed Above		K. He	ndling Codes for W	/astes L   b.	lated Above		
				01				
			C.	7/1/4	d.			
			et.	Pare a				
	15. Special Handling Instructions and Additional Information							
	PROFILE NUMBER B-10016							
	16.		Complete Control			A.		
GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and						or shipping name international and		
	national government regulations.							
	to be economically practicable and that I have selected the practicable method or vealment, storage, or usposa currently available to the which immanable to the							
	generation and select the best waste management method that is available to me and that it	can afford.						
	Printed/Typed Name Signature	- 2	5_			Month Day Year		
	17. Transporter 1 Acknowledgement of Receipt of Materials	·				1/10154717		
	Printed/Tyged Name // Signature		77		1	Month Day Yes		
	TAVIER HERNANDEZ TO	west	for the second	SIGN TA	las			
	18. Transporter 2 Acknowledgement of Receipt of Materials				_//_	Month Day You		
	Printed/Typed Name Signature					Month Dey Year		
	19. Discrepancy Indication Space		A.					
	20. Pacility Owner or Operator Certification of receipt of hazardous materials covered by this ma	nifest exce	of as no	ted in Item 19.	PT LESS SAME STORY	THE PROPERTY OF THE PROPERTY O		
	Printed/Typed Name  John HACTE  Signature	- 22	Yangara.			Month Day		
	Do Not Write Below This Lir	16				and of the second secon		
	-22 Previous editions are obsolete.		: TSDF	SENDS THIS CO	PY TO	DOHS WITHIN 30 E		

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To: P.O. Box 3000, Sacramento, CA 95812